

This application must be in the hands of the Electrical Administrative Board 30 days prior to the date of the examination.

THE ELECTRIC BALTI

	Application Received Approved for Examination
CTRICAL ADMINISTRATIVE BOARD BALTIMORE COUNTY County Office Building Towson, Maryland 21204 Phone 410-887-3960	Approved for License
Date	

	APP	LICATION FO	R ELECTRICIANS EXAMINATION	
	APPLICATIO	ON WILL BE RE	JECTED WITHOUT LETTERS OF REFERENCE	
		□ Exam	ination Re-examination	
of the Company.		considered unless	mitted, and verification is required on employer's letterhead, signed by the representance and/or certified copies license.	
1. Check class	s of license applied for:			
	(Letters	of reference are re	quired accompanied with license holder's number)	
□ Restrict	ted			
the supervisi	now 3 years experience in the ion of a master general, mappenent and wiring operating	ster limited, or restr	which you supervised or were actively in charge of electrical installation work u icted electrician. Authorizes the holder thereof to install, maintain, and repair lo	nder W
	e Board's rules and reg and accurate answers		make application for an examination and/or license as indicated ab questions.	ove,
2. Full Name				
	First	Middle	Last	
3. Home Address	Street and Number		State	
	Succiana Number	CILV	Diano	

4. Home Telephone Number:			Social Security Number:	Social Security Number:		
5. Date of Birth	Date of Birth Age Last Birthday					
6. Have you eve	er taken an examinat	ion before in this county?	If so, give the dates			
6a. Have you eve	er had an electrical l	icense in this county before? _	If so, give your license	number at that time		
7. List county	or city, license numb	ber, and type of license of the l	icenses you hold in other jurisdictions i	n Maryland		
worked as a	n apprentice or help	er; number of years	ectrical business or trade; numenthat you worked as a journeyman;	·		
order		-	ou are able. If additional space is need			
Length of I From Mo/Yr	Employment To Mo/Yr	Worked as	Name of Employer	Address		
10. Education: I	l Highest grade you ha	ave completed Name of	your high school:			
have taken _						
11. If you intend	d on being in busine	ss for yourself or to be a repres	entative of a company or firm, list the f	following:		
Name under	which you/they wil	l do or are doing business:				
Telephone N	No					
Address						
	NOT	E: By law you are allowed to re	epresent only one company or firm at a	time		
			that all statements contained herein are use it in strict accordance with the laws			
			E USE ONLY			
License fee:		License fee deposit	ed:	Cash Slip No		
	Date License Is	sued:	Auditor's No.			